

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>KH</i>	<i>70591</i>	<i>2/2</i>
O.I.P.E. CLASSIFIER			<i>2/22</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>JAB</i>	<i>70303</i>	<i>3-21</i>

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral) ... Canceled      A ..... Appeal  
÷ ..... Restricted      O ..... Objected

Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions  
staple additional sheet here